**Vermilion Association for Special Education**

**Educational Support Staff Evaluation Plan**



**Board Adopted on June 1, 2015**

The Vermilion Association for Special Education Educational Support Staff Evaluation Plan is based on the premise that professional growth is essential for the improvement of the classified staff member’s performance evaluation process. By providing the Employee with clear, well-defined expectations and on-going feedback, the performance evaluation process should develop and maintain highly-qualified educational support staff. This process should be continuous and constructive and should take placed in an atmosphere of mutual trust, support and respect.

The Vermilion Association for Special Education Educational Support Staff Evaluation Plan is an evaluation process that supports and enhances the goals for the Vermilion Association for Special Education and the State of Illinois, seeking to improve classroom instruction, student achievement and recognition of professional development of the educational support staff.

The evaluation tools have been designed to focus feedback and communication on performance standards as well as to give each Employee the opportunity to reflect on his/her own practice and performance.

**The purpose of our Non-Certified Evaluation Plan is to achieve the following:**

* Ensure positive interaction, quality instruction, and learning for all students
* Develop each individual’s capacity for professional contribution to the team, building and district levels
* Support Vermilion Association for Special Education’s culture, vision, and mission
* Support Employee growth through an evaluation process within clearly defined expectations that promotes examination of practice
* Build and foster collaborative relationships among the Employee and the Evaluator

**General Procedural Guidelines for Performance Evaluator Process**

1. Evaluations of the Educational Support Staff will occur annually for the first two years and at least every other year thereafter.
2. The Vermilion Association for Special Education Educational Support Staff Evaluation Plan will be reviewed with the Employee by the first student attendance day (or within 30 days of hire, if hired after the start of the year).
3. The Employee will be provided with a written notification of evaluator and list of main duties (job description) by the first student attendance day (or within 30 days of hire, if hired after the start of the year).
4. The Evaluator (Principal/Adminstrator) will complete evaluations of the Educational Support Staff with input from the immediate supervisor through the Educational Support Staff Feedback Form (if applicable).

* By February 1st, the immediate supervisor and Employee to review the Educational Support Staff Feedback Form **(Form A)**.
* A copy if given to the Employee.
* Original is provided to the Evaluator.

1. The evaluations will be discussed between the Employee and the Evaluator at a Performance Evaluation Conference.
   1. This conference shall take place by April 1st.
   2. This conference will be held at a mutually agreed-upon time.
   3. One day prior to the Performance Evaluation Conference, the Evaluator will provide the Employee with a final evaluation **(Form C-J)** and a Performance Evaluation Rating Form **(Form B).**
   4. The Employee and Evaluator will review the final evaluation and discuss possible next steps for professional growth.
   5. Employees shall have the opportunity to write comments of agreement/disagreement and attach them to their evaluation form.
   6. The Evaluator will write an explanation for unsatisfactory ratings.
   7. There are four possible ratings: Excellent, Proficient, Needs Improvement, or Unsatisfactory. If a descriptor does not apply, Not Applicable (NA) will be checked.

**Roles of Evaluators and Teachers/Specialists in Evaluation Process**

***Evaluator’s Responsibilities***

* Communicate with Employees including feedback aligned to the evaluation rubric.
* Meet with Employees to discuss expectations based on the evaluation rubrics/performance assessments and cooperative/district/school goals.
* Complete required reports.
* Continuously provide feedback to Employee regarding practice.
* Conduct summative conference and notify Employee of employment status.
* Maintain the integrity of the Vermilion Association of Special Education Non-Certified Employee Evaluation Plan.

***Teacher/Specialist’s Responsibilities***

* Understand and implement the evaluation rubric.
* Meet with immediate supervisor to ensure adherence to the goals/expectations of the assignment and evaluation rubric.
* Take personal responsibility for attaining *Proficient* or *Excellent* performance.
* Meet with the evaluator to review performance and identify areas of strengths and weaknesses.
* Maintain the integrity of the Vermilion Association of Special Education Non-Certified Employee Evaluation Plan.

**Professional Evaluation Rating Definitions**

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| **Excellent** | * Professional practice at the *Excellent* level is consistently characterized by extensive knowledge and expertise in understanding and implementing the components of the Vermilion Association for Special Education Non-Certified Employee Evaluation Plan. * Practice at the *Excellent* level is characterized by exceptional commitment to flexible and responsive practice. * An Employee at the *Excellent* level takes initiative, provides leadership in the cooperative and/or districts and is committed to reflective, continuous, professional practice. |
| **Proficient** | * Professional practice at the *Proficient* level is consistently characterized by evidence of a solid knowledge, understanding, and implementation of the components of the Vermilion Association for Special Education Non-Certified Employee Evaluation Plan. * Practice at the *Proficient* level is consistent and accurate. * An Employee at the *Proficient* level works independently and collaboratively to improve his/her professional practice. |
| **Needs Improvement** | * Professional practice at the *Needs Improvement* level is characterized by evidence of minimal understanding and/or implementation of the Vermilion Association for Special Education Non-Certified Employee Evaluation Plan. * Practice at the *Needs Improvement* level is inconsistent. Understanding and implementation of professional behaviors demonstrate limited effectiveness with uneven results. * An Employee at the *Needs Improvement* is inconsistently able to work independently and/or collaboratively and needs administrative assistance to improve his/her professional practice. |
| **Unsatisfactory** | * Professional practice at the *Unsatisfactory* level is characterized by evidence of little to no understanding and/or implementation of the Vermilion Association for Special Education Non-Certified Evaluation Plan. * Practice at the *Unsatisfactory* level is harmful or detrimental to the cooperative/district/school. Inappropriate and/or unprofessional behaviors persist even after support(s) have been provided. * An Employee at the *Unsatisfactory* level is unable to work independently and/or collaboratively and requires constant administrative assistance to improve his/her professional practice. |

**Professional Evaluation Rating System**

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| **Excellent** | * Eighteen or more components are *Excellent* with the rest *Proficient* |
| **Proficient** | * No more than four components rated *Needs Improvement* with no more than two components at the *Needs Improvement* level in any one Domain with the remaining components must be rated *Proficient* or higher |
| **Needs Improvement** | * Five or more components rated *Needs Improvement*, OR * Three or more components rated *Needs Improvement* in any one Domain, OR * One component rated *Unsatisfactory* |
| **Unsatisfactory** | * Two or more components rated *Unsatisfactory*, OR * Two consecutive performance evaluation ratings of *Needs Improvement* |

**Form A:** **Educational Support Staff Feedback Form (1)**

**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Assessment Period: from\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_**

**Position/Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District/School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Immediate Supervisor (completing assessment):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This assessment has been developed to provide feedback to the Employee regarding job performance as it relates to the current position/job. Its purpose is to provide input to the Evaluator regarding job performance.

* Assessment will be done by immediate supervisor.
* By February 1st, the immediate supervisor and Employee to review the Educational Support Staff Assessment Form
* The immediate supervisor shall write comments regarding employee job performance for each section of the assessment.
* A copy of the assessment will be sent to the Evaluator for evaluation and a copy given to the Employee.
* The original evaluation and assessment form will be placed in the employee’s personnel file.

**Form A:** **Educational Support Staff Feedback Form (2)**

**ASSESSMENT CONFERENCE** DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Professional Work Habits:**

* Dependable attendance
* Punctual
* Reliable
* Maintains confidentiality
* Follows building policies

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**II. Time Management:**

* Utilizes non-student time efficiently
* Performs related classroom duties
* Actively involves students in activities during unstructured time
* Follows provided schedule

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**III. Physical Management & Safety:**

* Assures student and staff safety and/or health concerns
* Informs teacher of student safety concerns
* Monitors assigned students during instructional/non-instructional time
* Utilizes proper techniques when physically assisting students
* Utilizes proper precautions/procedures (as trained) when assisting students with medical needs

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**IV. Personal Attributes:**

* Self confident
* Seeks information/accepts and incorporates feedback
* Judgment-calm under pressure
* Makes decisions appropriate to student needs
* Questions unclear information
* Shows enthusiasm for working with students
* Flexible
* Sensitive to student needs
* Seeks professional growth opportunities
* Shows initiative
* Solves or reports problems promptly
* Uses appropriate tone of voice/facial expression/body language

Comments: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Form A:** **Educational Support Staff Assessment Form (3)**

1. **Communication Skills A:**

* Generally positive interacting with students
* Uses appropriate vocabulary and conceptual level
* Models/facilitates appropriate communication for students
* Communicates appropriately to students’ age level

Comments: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Communication Skills B:**

* Communicates with teachers & support staff
* Communicates with parents as directed by classroom teacher
* Ability to work with others
* Seeks assistance of other staff as needed
* Communicates with other staff regarding program, changes etc.

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **Instructional Skills:**

* Directs/redirects student attention to task
* Presents directions clearly
* Provides feedback to students that is immediate, positive in quality and affect and follows student program
* Consistent expectations of students
* Adapts materials as needed
* Manages small group of students appropriately
* Runs instructional programs as trained and as designed by teacher
* Understands individual student programs
* Encourages/provides opportunities for student independence
* Consistently takes accurate data

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Supervising Teacher Date

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Teaching Assistant Date

**THIS FORM SHOULD BE COMPLETED BY THE IMMEDIATE SUPERVISOR AND SHARED WITH THE EMPLOYEE PRIOR TO THE 1ST OF FEBRUARY. A COPY SHOULD BE GIVEN TO THE EMPLOYEE AND THE ORIGINAL TO THE DESIGNATED ADMINISTRATOR.**

**Form B: Vermilion Association for Special Education Performance Evaluation Rating (Summative) Form**

Employee: Click here to enter text. Evaluator: Click here to enter text.

School/Position: Click here to enter text. Years of Service: Choose an item.

Formal Observation Dates: Click here to enter a date. Informal Observation Dates: Click here to enter a date.

Performance Evaluation Rating Issued Date: Click here to enter a date.

Performance Evaluation Conference Date: Click here to enter a date.

Performance Evaluation Rating:

Domain 1: Domain 2: Domain 3: Domain 4:

1/A: Choose an item. 9/A: Choose an item. 17/A: Choose an item. A: Choose an item.

2/B: Choose an item. 10/B: Choose an item. 18/B: Choose an item. B: Choose an item.

3/C: Choose an item. 11/C: Choose an item. 19/C: Choose an item. C: Choose an item.

4/D: Choose an item. 12/D: Choose an item. 20/D: Choose an item. D: Choose an item.

5/E: Choose an item. 13/E: Choose an item. 21/E: Choose an item. E: Choose an item.

6/F: Choose an item. 14/F: Choose an item. 22/F: Choose an item. F: Choose an item.  
7/G: Choose an item. 15/G: Choose an item. G: Choose an item. G: Choose an item.

8/H: Choose an item. 16/H: Choose an item. H: Choose an item. H: Choose an item.

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| --- | --- | --- | --- |
| **Overall Rating** | | | |
| **Excellent** | **Proficient** | **Needs Improvement** | **Unsatisfactory** |
| Eighteen or more components are *Excellent* with the rest *Proficient* | No more than four components rated *Needs Improvement* with no more than two components at the *Needs Improvement* level in any one Domain with the remaining components rated *Proficient* or higher | Five or move components rated *Needs Improvement*  Three or more components rated *Needs Improvement* in any one Domain  One component rated Unsatisfactory | Two or more components rated *Unsatisfactory*  Two consecutive performance evaluation ratings of *Needs Improvement* |

We have conducted a conversation regarding **Form C-J.** The Employee has the right to attach written comments for inclusion in his/her personnel file. This overall rating is based on Vermilion Association for Special Education’s Performance Evaluation Definitions and Operating Principles.

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature indicates only that the Teacher has received the evaluation.*

Evaluator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_